

JUL 19 2004

PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,388.00)

Complete if Known	
Application Number	09/847960-Conf. #6153
Filing Date	May 2, 2001
First Named Inventor	Susan E. SWIFT
Examiner Name	CELSA, Bennett M.
Art Unit	1639
Attorney Docket No.	RGV-012

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None
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 Deposit Account:Deposit Account Number **12-0080**Deposit Account Name **Lahive & Cockfield, LLP**

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
- Charge any additional fee(s) or any underpayment of fee(s)
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee	Fee	Fee Description
Code (\$)	Code (\$)	Code (\$)	Fee	Fee	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee				
1002 340	2002 170	Design filing fee				
1003 530	2003 265	Plant filing fee				
1004 770	2004 385	Reissue filing fee				
1005 160	2005 80	Provisional filing fee				

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	-32** =	Extra Claims	Fee from below	Fee Paid
117	-32** =	85	x 9.00	= 765.00
Independent Claims 9	-3** =	8	x 43.00	= 258.00
Multiple Dependent			145.00	= 145.00

Large Entity	Small Entity	Fee	Fee	Fee Description
Code (\$)	Code (\$)	Code (\$)	Fee	Fee Description
1202 18	2202 9	Claims in excess of 20		
1201 88	2201 43	Independent claims in excess of 3		
1203 290	2203 145	Multiple dependent claim, if not paid		
1204 85	2204 43	" Reissue independent claims over original patent		
1205 18	2205 9	" Reissue claims in excess of 20 and over original patent		

SUBTOTAL (2) (\$ 1,168.00)

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath			
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet			
1053 130	1053 130	Non-English specification			
1812 2,520	1812 2,520	For filing a request for ex parte reexamination			
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action			
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action			
1251 110	2251 55	Extension for reply within first month	55.00		
1252 420	2252 210	Extension for reply within second month			
1253 950	2253 475	Extension for reply within third month			
1254 1,480	2254 740	Extension for reply within fourth month			
1255 2,010	2255 1,005	Extension for reply within fifth month			
1401 330	2401 165	Notice of Appeal	165.00		
1402 330	2402 165	Filing a brief in support of an appeal			
1403 290	2403 145	Request for oral hearing			
1451 1,510	1451 1,510	Petition to institute a public use proceeding			
1452 110	2452 55	Petition to revive - unavoidable			
1453 1,330	2453 665	Petition to revive - unintentional			
1501 1,330	2501 665	Utility issue fee (or reissue)			
1502 480	2502 240	Design issue fee			
1503 640	2503 320	Plant issue fee			
1460 130	1460 130	Petitions to the Commissioner			
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)			
1806 180	1806 180	Submission of Information Disclosure Stmt			
8021 40	8021 40	Recording each patent assignment per property (times number of properties)			
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))			
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))			
1801 770	2801 385	Request for Continued Examination (RCE)			
1802 900	1802 900	Request for expedited examination of a design application			

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 220.00)

(Complete if applicable)

Name (Print/Type)	Lisa M. DiRocco	Registration No. (Attorney/Agent)	51,619	Telephone	(617) 227-7400
Signature	<i>Lisa M. DiRocco</i>			Date	July 19, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL982737465US, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 19, 2004

Signature: *Lisa M. DiRocco* (Lisa M. DiRocco)